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## BIB DATA SHEET

CONFIRMATION NO. 9986

<b>SERIAL NUMBER</b> 10/723,364	<b>FILING or 371(c) DATE</b> 11/26/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3769	<b>ATTORNEY DOCKET NO.</b> P0004962.00		
<b>APPLICANTS</b> Brian B. Lee, Golden Valley, MN; Tommy D. Bennett, Shoreview, MN; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 02/27/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/KAI RAJAN/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 7 <del>30</del>	<b>INDEPENDENT CLAIMS</b> 1 <del>3</del>
<b>ADDRESS</b> MEDTRONIC, INC. 710 MEDTRONIC PARKWAY NE MINNEAPOLIS, MN 55432-9924 UNITED STATES						
<b>TITLE</b> Multi-level averaging scheme for acquiring hemodynamic data						
<b>FILING FEE RECEIVED</b> 1080	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			